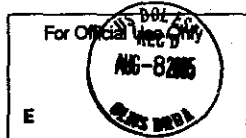


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U- <u>5278</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / 2004 Through: <u>12</u> / <u>31</u> / 2004
3. Name and address of person filing. Name <u>Jeffrey R LaBroski</u> P.O. Box, Bldg., Room No., if any Street <u>1802 Cotton Mill Ct.</u> City <u>Richmond</u> State <u>Texas</u> ZIP Code + 4 <u>77469-2101</u>	4. Name, file number, and address of labor organization. Name <u>Plumbers AFL-CIO Local Union 68</u> Labor Organization File Number <u>039-449</u> P.O. Box, Building and Room Number, if any <u>PO Box 8746</u> Street <u>502 Link Rd</u> City <u>Houston</u> State <u>Texas</u> ZIP Code + 4 <u>77249-8746</u>
5. Position in labor organization. <u>President and Organizer</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>Houston Area Plumbing JAC</u> Trade Name, if any: P.O. Box, Bldg., Room No., if any <u>PO Box 8653</u> Street <u>454 Link Rd.</u> City <u>Houston</u> State <u>Texas</u> ZIP Code + 4 <u>77249-8653</u>	7.a. Nature of Interest, Transaction, or Income. <u>1/6/2004- Received reimbursement for expenses to attend UA Instructor Training in Ann Arbor MI.</u> 7.b. Amount. <u>\$46</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>[Signature]</u>	On <u>8/3/2005</u> Date	<u>(281) 341-0895</u> Telephone Number

Name of Person Filing Jeffrey LaBroski	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8. Name and address of Business (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State</p> <p>ZIP Code + 4</p>	<p>9. Business deals with:</p> <p>a. Labor Organization</p> <p>b. Trust</p> <p>c. Employer</p>
<p>10. If 9.b. or 9.c. is checked give trust or employer's name.</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State</p> <p>ZIP Code + 4</p>	<p>11.a. Nature of such dealing.</p> <p>11.b. Approximate dollar value of such dealing.</p> <p>12.a. Nature of interest held or income received.</p> <p>12.b. Amount.</p>

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

<p>13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State</p> <p>ZIP Code + 4</p>	<p>14.a. Nature of payment.</p>
<p>13.b. Is the Business an Employer or Consultant ?</p>	<p>14.b. Amount of payment.</p>

Name of Person Filing Jeffrey LaBroski	File Number U-
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Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 5/19/2004- Accidental Insurance coverage paid to Mass Benefits Consultants on my behalf 7.b. Amount. <div align="right">\$9</div>

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 7/13/2004- Received expense allowance for meals and/or class materials to attend UA INstructor Training in Ann Arbor, MI 7.b. Amount. <div align="right">\$450</div>

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 7/30/2004- Application fee paid to National Labor College on my behalf 7.b. Amount. <div align="right">\$25</div>

Name of Person Filing Jeffrey LaBroski	File Number U-
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Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 7/30/2004- Airfare expense paid to attend UA Instructor Trainging in Ann Arbor, MI <hr/> 7.b. Amount. <div align="right">\$287</div>

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 8/25/2004- Lodging expense paid to attend UA Instructor Training in Ann Arbor, MI <hr/> 7.b. Amount. <div align="right">\$540</div>

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 8/25/2004- Transportation expense paid to attend UA Instructor Training in Ann Arbor, MI <hr/> 7.b. Amount. <div align="right">\$139</div>

Name of Person Filing Jeffrey LaBroski	File Number U-
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Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 8/25/2004- Meal expense for Instructor Training in Ann Arbor, MI 7.b. Amount. \$50

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 9/14/2004- Received reimbursement for expenses to attend UA Instructor Training in Ann Arbor, MI 7.b. Amount. \$152

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 1/30/2004- Kristi LaBroski (spouse) Received reimbursement for mileage to assist in Continuing Education classes 7.b. Amount. \$40

Name of Person Filing Jeffrey LaBroski	File Number U-
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Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 3/26/2004- Kristi LaBroski (spouse) Received reimbursement for mileage to assist in Continuing Education classes
	7.b. Amount. <div align="right">\$40</div>

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 5/19/2004- Kristi LaBroski (spouse) Received reimbursement for mileage to assist in Continuing Education classes
	7.b. Amount. <div align="right">\$109</div>

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 6/21/2004- Kristi LaBroski (spouse) Received reimbursement for mileage to assist in Continuing Education classes
	7.b. Amount. <div align="right">\$37</div>

Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name Houston Area Plumbing JAC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any PO Box 8653

Street 454 Link Rd.

City Houston

State Texas

ZIP Code + 4 77249-8653

7.a. Nature of Interest, Transaction, or Income.

1/1/2004 - 12/31/2004- Wages for Kristi LaBroski (spouse)

7.b. Amount.

\$39,998

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name Houston Area Plumbing JAC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any PO Box 8653

Street 454 Link Rd.

City Houston

State Texas

ZIP Code + 4 77249-8653

7.a. Nature of Interest, Transaction, or Income.

1/1/2004 - 12/31/2004- Kristi LaBroski (spouse) UA Plumbers & Pipefitters National Pension Fund paid on her behalf

7.b. Amount.

\$5,272

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name if any).

Name Houston Area Plumbing JAC

Trade Name, if any:

P.O. Box, Bldg., Room No., if any PO Box 8653

Street 454 Link Rd.

City Houston

State Texas

ZIP Code + 4 77249-8653

7.a. Nature of Interest, Transaction, or Income.

1/1/2004 - 12/31/2004- Kristi LaBroski (spouse) UA Local Union Officers & Employees Pension Fund paid on her behalf

7.b. Amount.

\$5,749

Name of Person Filing Jeffrey LaBroski	File Number U-
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Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 1/1/2004 - 12/31/2004- Kristi LaBroski (spouse) UA Local Union 68 Plumbers Trust Fund / Group protection paid on her behalf
	7.b. Amount. <div align="right">\$7,044</div>

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 1//1/2004 - 12/31/2004- Kristi LaBroski (spouse) UA Local Union 68 Plumbers Trust Fund / Pension Trust paid on her behalf
	7.b. Amount. <div align="right">\$1,890</div>

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 1/1/2004 - 12/31/2004- Kristi LaBroski (spouse) Employer Taxes & Contributions / Federal Unemployment paid on her behalf
	7.b. Amount. <div align="right">\$56</div>

Name of Person Filing Jeffrey LaBroski	File Number U-
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Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 1/1/2004 - 12/31/2004- Kristi LaBroski (spouse) Emploer Taxes & Contributions / Medicare paid on her behalf 7.b. Amount. <div align="right">\$580</div>

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Houston Area Plumbing JAC Trade Name, if any: P.O. Box, Bldg., Room No., if any PO Box 8653 Street 454 Link Rd. City Houston State Texas ZIP Code + 4 77249-8653	7.a. Nature of Interest, Transaction, or Income. 1/1/2004 - 12/31/2005- Kristi LaBroski (spouse) Employer Taxes & Contributions / Social Security paid on her behalf 7.b. Amount. <div align="right">\$2,480</div>

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.